# **ANNUAL SYNAR REPORT**

**42 U.S.C. 300x-26** OMB № 0930-0222

FFY 2011 State: Idaho

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#### INTRODUCTION

The Annual Synar Report (ASR) format provides the means for States to comply with the reporting provisions of the Public Health Service Act (42 U.S.C. 300x-26) and the Tobacco Regulation for the SAPT Block Grant (45 C.F.R. 96.130 (e)).

Public reporting burden for the collection of information is estimated to average 15 hours for Section I and 3 hours for Section II, including the time for reviewing instructions, completing and reviewing the collection of information, searching existing data sources, and gathering and maintaining the data needed. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to SAMHSA Reports Clearance Officer; Paperwork Reduction Project; 1 Choke Cherry Road, 7th Floor Rockville, Maryland 20857.

An agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0222 with an expiration date of 05-31-2013.

## How the Synar report helps the Center for Substance Abuse Prevention

In accordance with the tobacco regulations, States are required to provide detailed information on progress made in enforcing youth tobacco access laws (FFY 2010 Compliance Progress) and future plans to ensure compliance with the Synar requirements to reduce youth tobacco access rates (FFY 2011 Intended Use Plan). These data are required by 42 U.S.C. 300x-26 and will be used by the Secretary to evaluate State compliance with the statute. Part of the mission of the Center for Substance Abuse Prevention (CSAP) is to assist States¹ by supporting Synar activities and providing technical assistance helpful in determining the type of enforcement measures and control strategies that are most effective. This information is helpful to CSAP in improving technical assistance resources and expertise on enforcement efforts and tobacco control program support activities, including State Synar Program support services, through an enhanced technical assistance program involving conferences and workshops, development of training materials and guidance documents, and onsite technical assistance consultation.

### How the Synar report can help States

The information gathered for the Synar report can help States describe and analyze substate needs for program enhancements. These data can also be used to report to the State legislature and other State and local organizations on progress made to date in enforcing youth tobacco access laws when aggregated statistical data from State Synar reports can demonstrate to the Secretary the national progress in reducing youth tobacco access problems. This information will also provide Congress with a better understanding of State progress in implementing Synar, including State difficulties and successes in enforcing retailer compliance with youth tobacco access laws.

<sup>&</sup>lt;sup>1</sup>The term "State" is used to refer to all the States and territories required to comply with Synar as part of the Substance Abuse Prevention and Treatment Block Grant Program requirements (42 U.S.C. 300x-64 and 45 C.F.R. 96.121).

## Getting assistance in completing the Synar report

If you have questions about programmatic issues, you may call CSAP's Division of State Programs at (240) 276-2413 and ask for your respective State Project Officer, or contact your State Project Officer directly by telephone or email using the directory provided in the FY 2011 Uniform Application, Appendix A. If you have questions about fiscal or grants management issues, you may call the Grants Management Officer, Office of Program Services, Division of Grants Management, at (240) 276-1422.

## Where and when to submit the Synar report

The Annual Synar Report (ASR) must be received by SAMHSA no later than December 31, 2010. The ASR must be submitted in the **approved OMB report format**. Use of the approved format will avoid delays in the review and approval process. The chief executive officer (or an authorized designee) of the applicant organization must sign page 1 of the ASR certifying that the State has complied with all reporting requirements.

The State must upload one copy of the ASR using the online WebBGAS (Block Grant Application System). In addition, the following items must be uploaded to WebBGAS:

- FFY 2011 Synar Survey Results: States that use the Synar Survey Estimation System (SSES) must upload one copy of SSES Tables 1–5 (in Excel) to WebBGAS. States that do not use SSES must upload one copy of ASR Forms 1, 4, and 5, and Forms 2 and 3, if applicable, (in Excel) to WebBGAS.
- Synar Inspection Form: States must upload one blank copy of the inspection form used to record the result of each Synar inspection.
- Synar Inspection Protocol: States must upload a copy of the protocol used to train inspection teams on conducting and reporting the results of the Synar inspections.

Each State SSA Director has been emailed a login ID and password to log onto the Synar section of the WebBGAS site.

Additionally, the State must submit one signed original of the report (including the signed Funding Agreements/Certifications), as well as one additional copy of the signed Funding Agreements/Certifications, to the Grants Management Officer at the address below:

Ms. Barbara Orlando
Grants Management Officer
Office of Program Services
Division of Grants Management
Substance Abuse and Mental Health Services Administration

## Regular Mail:

## Overnight Mail:

1 Choke Cherry Road, Rm.7-1091 Rockville, Maryland 20857 1 Choke Cherry Road, Rm.7-1091 Rockville, Maryland 20850

## FFY 2011: FUNDING AGREEMENTS/CERTIFICATIONS

The following form must be signed by the Chief Executive Officer or an authorized designee and submitted with this application. Documentation authorizing a designee must be attached to the application.

# PUBLIC HEALTH SERVICES ACT AND SYNAR AMMENDMENT 42 U.S.C. 300x-26 requires each State to submit an annual report of its progress in meeting the requirements of the Synar Amendment and its implementing regulation (45 C.F.R. 96.130) to the Secretary of the Department of Health and Human Services. By signing below, the chief executive officer (or an authorized designee) of the applicant organization certifies that the State has complied with these reporting requirements and the certifications as set forth below. SYNAR SURVEY SAMPLING METHODOLOGY The State certifies that the Synar survey sampling methodology on file with the Center for Substance

SYNAR SURVEY INSPECTION PROTOCOL

by the Center for Substance Abuse Prevention.

The State certifies that the Synar Survey Inspection Protocol on file with the Center for Substance Abuse Prevention and submitted with the Annual Synar Report for FFY 2011 is up-to-date and approved by the Center for Substance Abuse Prevention.

Abuse Prevention and submitted with the Annual Synar Report for FFY 2011 is up-to-date and approved

State: Idaho	
Name of Chief Executive Officer or	Designee: Richard M. Armstrong
Signature of CEO or Designee:	
Title:	Date Signed:

FFY: 2011	State: Idaho	
	Date: 07/31/10	

# **SECTION I: FFY 2010 (Compliance Progress)**

# YOUTH ACCESS LAWS, ACTIVITIES, AND ENFORCEMENT

42 U.S.C. 300x-26 requires the States to report information regarding the sale/distribution of tobacco products to individuals under age 18.

tot	pacco pro	ducts to individuals under age 18.
1.	access s the last	ndicate any changes or additions to the State tobacco statute(s) relating to youth ince the last reporting year. If any changes were made to the State law(s) since reporting year, please attach a photocopy of the law to the hard copy of the d also upload a copy of the State law to WebBGAS. (see 42 U.S.C. 300x-26).
	a.	Has there been a change in the minimum sale age for tobacco products?
		☐ Yes ⊠ No
		If Yes, current minimum age: 19 20 21
	b.	Have there been any changes in State law that impact the State's protocol for conducting Synar inspections?  Yes No
		If Yes, indicate change. (Check all that apply.)
		☐ Changed to require that law enforcement conduct inspections of tobacco outlets ☐ Changed to make it illegal for youth to possess, purchase or receive tobacco ☐ Changed to require ID to purchase tobacco
		Other change(s) (Please describe.)
	c.	Have there been any changes in the law concerning vending machines?
	•	☐ Yes ⊠ No
		If Yes, indicate change. (Check all that apply.)
		☐ Total ban enacted
		Banned from location(s) accessible to youth
		Locking device or supervision required
		Other change(s) (Please describe.)
	. <b>d.</b>	Have there been any changes in State law that impact the following?
		Licensing of tobacco vendors Yes No
		Penalties for sales to minors Yes No
2.	42 U.S.C	e how the Annual Synar Report (see 45 C.F.R. 96.130(e)) and the State Plan (see C. 300x-51) were made public within the State prior to submission of the ASR. all that apply.)
	$\boxtimes$	Placed on file for public review
		Posted on a State agency Web site (Please provide exact Web address.)

		Notice published in a newspaper or newsletter  Public hearing
		Announced in a news release, a press conference, or discussed in a media interview
		Distributed for review as part of the SAPT Block Grant application process
		Distributed through the public library system
	Ī	Published in an annual register
		Other change(s) (Please describe.)
3.	Identify	the following agency or agencies (see 42 U.S.C. 300x-26 and 45 C.F.R. 96.130).
	a.	The State agency(ies) designated by the Governor for oversight of the Synar requirements:
		Idaho Department of Health and Welfare
		Has this changed since last year's Annual Synar Report?   Yes   No
	b.	The State agency(ies) responsible for conducting random, unannounced Synar inspections:
		Idaho Department of Health and Welfare
		Has this changed since last year's Annual Synar Report?   Yes   No
	c.	The State agency(ies) responsible for enforcing youth tobacco access law(s):
		Idaho Departmetn of Health and Welfare
		Has this changed since last year's Annual Synar Report?   Yes   No
4.	receives	the State agency responsible for tobacco prevention activities (the agency that the Centers for Disease Control and Prevention's National Tobacco Control n funding).
	Idaho D	epartment of Health and Welfare
	На	s the responsible agency changed since last year's Annual Synar Report?
		Yes No
	a.	Describe the coordination and collaboration that occur between the agency responsible for tobacco prevention and the agency responsible for oversight of the Synar requirements. (Check all that apply.) The two agencies
		Are the same
		Have a formal written memorandum of agreement
		Have an informal partnership
		Conduct joint planning activities
		Combine resources
		Have other collaborative arrangement(s) (Please describe.)

5. Please answer the following questions regarding the State's activities to enforce to youth access to tobacco law(s) in FFY 2010 (see 42 U.S.C. 300x-26 and 45 C.F.R. 96.130(e)).		orce the F.R.				
	;	. Which one of the followi tobacco laws carried out				ess to
		Enforcement is conduc	eted exclusively	by local law er	nforcement ag	encies.
		Enforcement is conduc	cted exclusively	by State agenc	y(ies).	
		Enforcement is conductive	cted by both loc	al <i>and</i> State age	encies.	
	1	tobacco laws by <u>LOCAL</u> <u>AGENCIES</u> . Please fill i for an item, please mark unknown, please mark "	AND/OR STA n the number i "NA" (not app	ATE LAW END requested. If Solicable). If a r	FORCEMEN tate law does esponse for a	<u>IT</u> not allow m item is
		PENALTY		OWNERS	CLERKS	TOTAL
		Number of citations issued		257	240	497
		Number of fines assessed		84	240	324
		Number of permits/licenses suspen	nded	0		0
		Number of permits/licenses revoked		0	7 an 17 No. 37	0
		Other (Please describe.)		N/A	N/A	N/A
		<ul> <li>Which one of the following access to tobacco laws can be accessed and accessed accessed and accessed accesse</li></ul>	arried out in you cted only at those cted only at a su cted at a combirets not randomly	se outlets rando bset of outlets nation of outlets y selected for the	mly selected to mot randomly s randomly selected to selected to se	for the Synar selected for the lected for the ey.
		<ul><li>I. Did every tobacco outlet compliance check in the</li><li>☑ Yes</li><li>☑ No</li></ul>		cerve at least o	ne entorcem	cint
		. What additional activiti and compliance with Sta				
		Merchant education a	_	P Za .	<b>C</b>	
		☐ Incentives for merchan compliance checks in and noncompliant retaced ☐ Community education	which compliar tilers are warned	nt retailers are g I about youth a	given positive	

	Media use to publicize compliance inspection results
	Community mobilization to increase support for retailer compliance with youth
	access laws  Other activities (Plane list)
	Other activities (Please list.)
	Briefly describe all checked activities:
f.	Are citations or warnings issued to retailers or clerks who sell tobacco to minors for inspections that are part of the Synar survey? X Yes No
	If "Yes" to 5f, please describe the State's procedure for minimizing risk of bias to the survey results from retailers alerting each other to the presence of the survey teams:
	The state conducts inspections throughout the year and citations are issued to clerks each time a sale occurs. The Synar inspections represent a subset of all inspections performed in a given year. The issuance of citations of sales is the standard operating procedure.
g.	Please describe the relationship between the State's Synar program and the
	Food and Drug Administration-funded enforcement program:
	The Department has submitted a response to the FDA RFP for tobacco enforcement. As of August 2010, the FDA and the Department are in contract negotiations. Currently, there is no relationship between the Department and the FDA tobacco enforcement program.
	•
	SYNAR SURVEY METHODS AND RESULTS
the State	ng questions pertain to the survey methodology and results of the Synar survey used to meet the requirements of the Synar Regulation in FFY 2010 (see 42 U.S.C. 300x-C.F.R. 96.130).
Has the	e sampling methodology changed from the previous year? 🔀 Yes 🗌 No
The Sta method Method	te is required to have an approved up-to-date description of the Synar sampling cology on file with CSAP. Please submit a copy of your Synar Survey Sampling cology (Appendix B). If the sampling methodology changed from the previous ag year, these changes must be reflected in the methodology submitted.
	answer the following questions regarding the State's annual random, bunced inspections of tobacco outlets (see 45 $C.F.R.\ 96.130(d)(2)$ ).
a.	Did the State use the optional Synar Survey Estimation System (SSES) to analyze the Synar survey data? 🖂 Yes 🔲 No
	If Yes, attach SSES summary tables 1, 2, 3, and 4 to the hard copy of the ASR and upload a copy of SSES tables 1–5 (in Excel) to WebBGAS. Then go to Question 8.
	e followithe State and 45 C  Has the The State methode Method reporting the second sec

If No, continue to Question 7b.

b.	Report the weighted and unweighted Retailer Violation Rate (RVR) estimates, the standard error, accuracy rate (number of eligible outlets divided by the total number of sampled outlets), and completion rate (number of eligible outlets inspected divided by the total number of eligible outlets).
	Unweighted RVR
	Weighted RVR
	Standard error (s.e.) of the (weighted) RVR
	Fill in the blanks to calculate the <u>right limit</u> of the right-sided 95% confidence interval.
	RVR Estimate+ plus(1.645 × times)Standard Error)= equalsRight Limit
	Accuracy rate
	Completion rate
c.	Fill out Form 1 in Appendix A (Forms1–5). (Required regardless of the sample design.)
d.	How were the (weighted) RVR estimate and its standard error obtained? (Check the one that applies.)
	☐ Form 2 (Optional) in Appendix A (Forms 1–5) (Attach completed Form 2.) ☐ Other (Please specify. Provide formulas and calculations or attach and explain the program code and output with description of all variable names.)
e.	If stratification was used, did any strata in the sample contain only one outlet or cluster this year?   No  No stratification
	If Yes, explain how this situation was dealt with in variance estimation.
f.	Was a cluster sample design used?   Yes No  If Yes, fill out and attach Form 3 in Appendix A (Forms 1–5), and answer the
	following question.
	If No, go to Question 7g.
	Were any certainty primary sampling units selected this year?   No
	If Yes, explain how the certainty clusters were dealt with in variance estimation.

g. Report the following outlet sample sizes for the Synar
---

	Sample Size
Effective sample size (sample size needed to meet the SAMHSA precision requirement assuming simple random sampling)	
Target sample size (the product of the effective sample size and the design effect)	
Original sample size (inflated sample size of the target sample to counter the sample attrition due to ineligibility and noncompletion)	
Eligible sample size (number of outlets found to be eligible in the sample)	-
Final sample size (number of eligible outlets in the sample for which an inspection was completed)	

	Eligible sample size (number of outlets found to be eligible in the sample)
	Final sample size (number of eligible outlets in the sample for which an inspection was completed)
	h. Fill out Form 4 in Appendix A (Forms 1–5).
8.	Did the State's Synar survey use a list frame? ⊠ Yes □ No
	If Yes, answer the following questions about its coverage.
	a. The calendar year of the latest frame coverage study: 2010
	b. Percent coverage from the latest frame coverage study: 96.7%
	c. Was a new study conducted in this reporting period? ⊠Yes ☐ No
	If <b>Yes,</b> please complete Appendix D (List Sampling Frame Coverage Study) and submit it with the Annual Synar Report.
	d. The calendar year of the next coverage study planned: 2013
9.	Has the Synar survey inspection protocol changed from the previous year?
	☐ Yes
	The State is required to have an approved up-to-date description of the Synar inspection protocol on file with CSAP. Please submit a copy of your Synar Survey Inspection Protocol (Appendix C). If the inspection protocol changed from the previous year, these changes must be reflected in the protocol submitted.
	a. Provide the inspection period: From <u>02/20/2010</u> to <u>06/30/2010</u> MM/DD/YY MM/DD/YY

b. Provide the number of youth inspectors used in the current inspection year:

<u>18</u>

NOTE: If the State uses SSES, please ensure that the number reported in 9b matches that reported in SSES Table 4, or explain any difference.

c. Fill out and attach Form 5 in Appendix A (Forms 1–5). (Not required if the State

used SSES to analyze the Synar survey data.)

# SECTION II: FFY 2011 (Intended Use):

Public law 42 U.S.C. 300x-26 of the Public Health Service Act and 45 C.F.R. 96.130 (e) (4, 5) require that the States provide information on future plans to ensure compliance with the Synar requirements to reduce youth tobacco access.

1.	In the upcoming year, does the State anticipate any changes in:
	Synar sampling methodology 🔲 Yes 🔀 No
	Synar inspection protocol Yes No
	If changes are made in either the Synar sampling methodology or the Synar inspection protocol, the State is required to obtain approval from CSAP prior to implementation of the change and file an updated Synar Survey Sampling Methodology (Appendix B) or an updated Synar Survey Inspection Protocol (Appendix C), as appropriate.
2.	Please describe the State's plans to maintain and/or reduce the target rate for Synar inspections to be completed in FFY 2011. Include a brief description of plans for law enforcement efforts to enforce youth tobacco access laws, activities that support law enforcement efforts to enforce youth tobacco access laws, and any anticipated changes in youth tobacco access legislation or regulation in the State.
	Law Enforcement:
	The State will continue to conduct inspections of tobacco retailers throughout the year in compliance with state law 39-5701 et seq.
	Retailer Education:
	In conjunction with its existing monthly Tobacco Retailer News Letter and education website the state will be producing and distributing a new retailer education package that target business owners and point-of-sale employees.
	Support of Enforcement and Youth Tobacco Access Laws:
	No activities in this area planned.
	Changes in Youth Tobacco Access Legislation:
	No activities in this area are planned.
3.	Describe any challenges the State faces in complying with the Synar regulation. (Check all that apply.)
	☐ Limited resources for law enforcement of youth access laws
	∠ Limited resources for activities to support enforcement and compliance with youth tobacco access laws
	Limitations in the State youth tobacco access laws
	Limited public support for enforcement of youth tobacco access laws

Limitations on completeness/accuracy of list of tobacco outlets
Limited expertise in survey methodology
Laws/regulations limiting the use of minors in tobacco inspections
Difficulties recruiting youth inspectors
Geographic, demographic, and logistical considerations in conducting inspections
Ultural factors (e.g., language barriers, young people purchasing for their elders)
☐ Issues regarding sources of tobacco under tribal jurisdiction
Other challenges (Please list.)
Briefly describe all checked challenges and propose a plan for each, or indicate the State's need for technical assistance related to each relevant challenge.
Geographic and logistical considerations - Idaho is a large, extremely mountainous state. It is costly to inspect remote areas. This adds to the cost of ensuring compliance. The state will continue to evaluate State Code and Synar requirements to identify opportunities for efficiency.

#### APPENDIX A: FORMS 1-5

FORM 1 (Required for all States not using the Synar Survey Estimation System (SSES) to analyze the Synar Survey data)

Complete Form 1 to report sampling frame and sample information and to calculate the unweighted retailer violation rate (RVR) using results from the current year's Synar survey inspections.

Instructions for Completing Form 1: In the top right-hand corner of the form, provide the State name and reporting Federal fiscal year (FFY 2011). Provide the remaining information by stratum if stratification was used. Make copies of the form if additional rows are needed to list all the strata.

- Column 1: If stratification was used:
  - 1(a) Sequentially number each row.
  - 1(b) Write in the name of each stratum. All strata in the State must be listed.

If no stratification was used:

- 1(a) Leave blank.
- 1(b) Write "State" in the first row (indicates that the whole State is a single stratum).

Note for unstratified samples: For Columns 2–5, wherever the instruction refers to "each stratum," report the specified information for the State as a whole.

- Column 2: 2(a) Report the number of over-the-counter (OTC) outlets in the sampling frame in each stratum.
  - 2(b) Report the number of vending machine (VM) outlets in the sampling frame in each stratum.
  - 2(c) Report the combined total of OTC and VM outlets in the sampling frame in each stratum.
- Column 3: 3(a) Report the estimated number of eligible OTC outlets in the OTC outlet population in each stratum.
  - 3(b) Report the estimated number of eligible VM outlets in the VM outlet population in each stratum.
  - 3(c) Report the combined total estimated number of eligible OTC and VM outlets in the total outlet population in each stratum.

The estimates for Column 3 can be obtained from the Synar survey sample as the weighted sum of eligible outlets by outlet type.

- Column 4: 4(a) Report the number of eligible OTC outlets for which an inspection was completed, for each stratum.
  - 4(b) Report the numbers of eligible VM outlets for which an inspection was completed, for each stratum.
  - 4(c) Report the combined total of eligible OTC and VM outlets for which an inspection was completed, for each stratum.
- Column 5: 5(a) Report the number of OTC outlets found in violation of the law as a result of completed inspections, for each stratum.
  - 5(b) Report the number of VM outlets found in violation of the law as a result of completed inspections, for each stratum.
  - 5(c) Report the combined total of OTC and VM outlets found in violation of the law as a result of completed inspections, for each stratum.
- Totals: For each subcolumn (a-c) in Columns 2-5, provide totals for the State as a whole in the last row of the table. These numbers will be the sum of the numbers in each row for the respective column.

FORM 1 (Required for all States not using the Synar Survey Estimation System [SSES] to analyze the Synar Survey data.)

		NO. OF OUTLETS FOUND IN VIOLATION DURING INSPECTIONS	(c) Total S Outlets (5a+5b)								
State:	(5)	OF OUTLETS FOUND VIOLATION DURING INSPECTIONS	(b) Vending Machines (VM)	:							
St		NO. OF C VIOL	(a) Over-the- Counter (OTC)								
		rlets )	(c) Total Outlets (4a+4b)								
<b>mage</b>	(4)	NUMBER OF OUTLETS INSPECTED	(b) Vending Machines (VM)								
ults by Sta		NUMB	(a) Over-the- Counter (OTC)								
ction Resi		BER OF TTS IN N	(c) Total Outlets (3a+3b)								
nar Inspe	(3)	ESTIMATED NUMBER OF ELIGIBLE OUTLETS IN POPULATION	(b) Vending Machines (VM)								
nary of Synar Inspection Results by Stratum		ESTIMA ELIGIE PV	(a) Over-the- Counter (OTC)								
Summ			LETS IN AME	(c) Total Outlets (2a+2b)							
	(2)	NUMBER OF OUTLETS IN SAMPLING FRAME	(b) Vending Machines (VM)								
	None	NUMBE SAM	(a) Over-the- Counter (OTC)								
		STRATUM	(b) Stratum Name								
	(1)	STRA	(a) Row#								

RECORD COLUMN TOTALS ON LAST LINE (LAST PAGE ONLY IF MULTIPLE PAGES ARE NEEDED).

#### FORM 2 (Optional)

Appropriate for stratified simple or systematic random sampling designs.

Complete Form 2 to calculate the weighted RVR. This table (in Excel form) is designed to calculate the weighted RVR for stratified simple or systematic random sampling designs, accounting for ineligible outlets and noncomplete inspections encountered during the annual Synar survey.

Instructions for Completing Form 2: In the top right-hand corner of the form, provide the State name and reporting Federal fiscal year (FFY 2011).

- Column 1: Write in the name of each stratum into which the sample was divided. These should match the strata reported in Column 1(b) of Form 1.
- Column 2: Report the number of outlets in the sampling frame in each stratum. These numbers should match the numbers reported for the respective strata in Column 2(c) of Form 1.
- Column 3: Report the original sample size (the number of outlets originally selected, *including* substitutes or replacements) for each stratum.
- Column 4: Report the number of sample outlets in each stratum that were found to be eligible during the inspections. Note that this number must be less than or equal to the number reported in Column 3 for the respective strata.
- Column 5: Report the number of eligible outlets in each stratum for which an inspection was completed. Note that this number must be less than or equal to the number reported in Column 4. These numbers should match the numbers reported in Column 4(c) of Form 1 for the respective strata.
- Column 6: Report the number of eligible outlets inspected in each stratum that were found in violation. These numbers should match the numbers reported in Column 5(c) of Form 1 for the stratum.
- Column 7: Form 2 (in Excel form) will automatically calculate the stratum RVR for each stratum in this column. This is calculated by dividing the number of inspected eligible outlets found in violation (Column 6) by the number of inspected eligible outlets (Column 5). The State unweighted RVR will be shown in the Total row of Column 7.
- Column 8: Form 2 (in Excel form) will automatically calculate the estimated number of eligible outlets in the population for each stratum. This calculation is made by multiplying the number of outlets in the sampling frame (Column 2) times the number of eligible outlets (Column 4) divided by the original sample size (Column 3). Note that these numbers will be less than or equal to the numbers in Column 2.
- Column 9: Form 2 (in Excel form) will automatically calculate the relative stratum weight by dividing the estimated number of eligible outlets in the population for each stratum in Column 8 by the Total of the values in Column 8.
- Column 10: Form 2 (in Excel form) will automatically calculate each stratum's contribution to the State weighted RVR by multiplying the stratum RVR (Column 7) by the relative stratum weight (Column 9). The weighted RVR for the State will be shown in the Total row of Column 10.
- Column 11: Form 2 (in Excel form) automatically calculates the standard error of each stratum's RVR (Column 7). The standard error for the State weighted RVR will be shown in the Total row of Column 11.
- TOTAL: For Columns 2–6, Form 2 (in Excel form) provides totals for the State as a whole in the last row of the table. For Columns 7–11, it calculates the respective statistic for the State as a whole.

FORM 2 (Optional) Appropriate for stratified simple or systematic random sampling designs.

	Standard Error of Stratum RVR	
State: EFY: 2011	(10) pw Stratum Contribution to State Weighted RVR	
	(9) w=N'/Total Column 8 Relative Stratum Weight	
ate	(8) N=N(n1/n) Estimated Number of Eligible Outlets in Population	
r Violation R	(7) p=x/n2 Stratum Retailer Violation Rate	
culation of Weighted Retailer Violation Rate	(6) x Number of Outlets Found in Violation	
ulation of We	(5) n2 Number of Outlets Inspected	
Calc	(4) n1 Number of Sample Outlets Found Eligible	
	(3) n Original Sample Size	
	(2) N Number of Outlets in Sampling Frame	And the second of the second o
	(1) Stratum Name	<b>Total</b>

- number of outlets in sampling frame

original sample size (number of outlets in the original sample)

- number of sample outlets that were found to be eligible

n2 - number of eligible outlets that were inspected

number of inspected outlets that were found in violation

- estimated number of eligible outlets in population (N'=N\*n1/n) - stratum retailer violation rate (p=x/n2)

w - relative stratum weight (w=N'/Total Column 8) pw - stratum contribution to the weighted RVR

s.e. - standard error of the stratum RVR

# FORM 3 (Required when a cluster design is used for all States not using the Synar Survey Estimation System [SSES] to analyze the Synar survey data.)

Complete Form 3 to report information about primary sampling units when a cluster design was used for the Synar survey.

Instructions for Completing Form 3: In the top right-hand corner of the form, provide the State name and reporting Federal fiscal year (FFY 2011).

Provide information by stratum if stratification was used. Make copies of the form if additional rows are needed to list all the strata.

Column 1: Sequentially number each row.

Column 2: If stratification was used: Write in the name of stratum. All strata in the State must be

listed.

If no stratification was used: Write "State" in the first row to indicate that the whole

State constitutes a single stratum.

Column 3: Report the number of primary sampling units (PSUs) (i.e., first-stage clusters) created for

each stratum.

Column 4: Report the number of PSUs selected in the original sample for each stratum.

Column 5: Report the number of PSUs in the final sample for each stratum.

TOTALS: For Columns 3–5, provide totals for the State as a whole in the last row of the table.

Summary of Clusters Created and Sampled  State:  FFY: 2011							
(1) Row#	(2) Stratum Name	(3) Number of PSUs Created	(4) Number of PSUs Selected	(5) Number of PSUs in the Final Sample			
		Total					

FORM 4 (Required for all States not using the Synar Survey Estimation System [SSES] to analyze the Synar Survey data)

Complete Form 4 to provide detailed tallies of ineligible sample outlets by reasons for ineligibility and detailed tallies of eligible sample outlets with noncomplete inspections by reasons for noncompletion.

Instructions for Completing Form 4: In the top right-hand corner of the form, provide the State name and reporting Federal fiscal year (FFY 2011).

Column 1(a): Enter the number of sample outlets found ineligible for inspection by reason for ineligibility. Provide the total number of ineligible outlets in the row marked "Total."

Column 2(a): Enter the number of eligible sample outlets with noncomplete inspections by reason for noncompletion. Provide the total number of eligible outlets with noncomplete inspections in the row marked "Total."

Inspection Tallies 1	oy Reason	of Ineligibility or Noncompletion State: FFY: 2011	
(1) INELIGIBLE		(2) ELIGIBLE	
Reason for Ineligibility	(a) Counts	Reason for Noncompletion	(a) Counts
Out of business		In operation but closed at time of visit	
Does not sell tobacco products		Unsafe to access	
Inaccessible by youth		Presence of police	
Private club or private residence		Youth inspector knows salesperson	
Temporary closure		Moved to new location	
Unlocatable		Drive-thru only/youth inspector has no driver's license	
Wholesale only/Carton sale only		Tobacco out of stock	
Vending machine broken		Ran out of time	
Duplicate  Other ineligibility reason(s) (Describe.)		Other noncompletion reason(s) (Describe.)	
Total	Annual Control of the	Tota	

FORM 5 (Required for all States not using the Synar Survey Estimation System [SSES] to analyze the Synar survey data)

Complete Form 5 to show the distribution of outlet inspection results by age and gender of the youth inspectors.

Instructions for Completing Form 5: In the top right-hand corner of the form, provide the State name and reporting Federal fiscal year (FFY 2011).

Column 1: Enter the number of attempted buys by youth inspector age and gender.

Column 2: Enter the number of successful buys by youth inspector age and gender.

If the inspectors are age eligible but the gender of the inspector is unknown, include those inspections in the "Other" row. Calculate subtotals for males and females in rows marked "Male Subtotal" and "Female Subtotal." Sum subtotals for Male, Female, and Other and record in the bottom row marked "Total." Verify that that the total of attempted buys and successful buys equals the total for Column 4(c) and Column 5(c), respectively, on Form 1. If the totals do not match, please explain any discrepancies.

	Synar Survey Inspector Charact	
		State:
		FFY: 2011
	(1) Attempted Buys	(2) Successful Buys
Male		
15 years		
16 years		
17 years		
18 years		
Male Subtotal		
Female		
15 years		
16 years		
17 years		
18 years		
Female Subtotal		
Other		
Total		

## APPENDIXES B & C: FORMS

## Instructions

Appendix B (Sampling Design) and Appendix C (Inspection Protocol) are to reflect the State's CSAP-approved sampling design and inspection protocol. These appendixes, therefore, should generally describe the design and protocol and, with the exception of Question #10 of Appendix B, are not to be modified with year-specific information. Please note that any changes to either appendix must receive CSAP's advance, written approval. To facilitate the State's completion of this section, simply cut and paste the previously approved sampling design (Appendix B) and inspection protocol (Appendix C).

# APPENDIX B: SYNAR SURVEY SAMPLING METHODOLOGY

			e: Idaho Y: 2011				
1. What type of sa	ampling i	frame is used?					
∑ List fra	me (Go t	o Question 2.)					
<del></del>	•	to Question 3.)					
List-as:	sisted are	a frame (Go to Question 2.)					
2. List all sources of the list frame. Indicate the type of source from the list below. Provid a brief description of the frame source. Explain how the lists are updated (method), including how new outlets are identified and added to the frame. In addition, explain how often the lists are updated (cycle). (After completing this question, go to Question 4.)  Use the corresponding number to indicate Type of Source in the table below.							
2 – Local con	nmercial bu	al business list usiness list 5 - Statewide liquor li cense/permit list 6 - Other					
Name of Frame Source	Type of Source	Description	Updating Method and Cycle				
laho Tobacco Permit atabase (ITPD)	3	Idaho law requires all businesses that sell tobacco to obtain a permit from the Idaho Department of Health and Welfare.	The ITPD is updated throughout the year through renewals by mail, phone and internet, and as new businesses open.				
3. If an area fram	e is used	, describe how area sampling units a	re defined and formed.				
If Yes,		out in the formation of the area francentage of the State's population is no					
		ires that vending machines be inspec chines included in the Synar survey					
If <b>No,</b> plea	ise indica	te the reason they are not included in t	the Synar survey,				
		rending machines.  Trending machines from locations acces	sible to youth.				
	ATT CUITS A	ATTACLE THE STREET TO THE TO ARREST WOOD					

	Which ca	ntegory below best describes the sample design? (Check only one.)
		Census (STOP HERE: Appendix B is complete.)
	Uns	stratified statewide sample:
	$\boxtimes$	Simple random sample (Go to Question 9.)
		Systematic random sample (Go to Question 6.)
		Single-stage cluster sample (Go to Question 8.)
		Multistage cluster sample (Go to Question 8.)
	Stra	atified sample:
		Simple random sample (Go to Question 7.)
		Systematic random sample (Go to Question 6.)
		Single-stage cluster sample (Go to Question 7.)
		Multistage cluster sample (Go to Question 7.)
		Other (Please describe and go to Question 9.)
		the systematic sampling methods. (After completing Question 6, go to Question 5 cation is used. Otherwise go to Question 9.)
	if stratific	the following information about stratification.
	if stratific	cation is used. Otherwise go to Question 9.)
	Provide (	the following information about stratification.  Provide a full description of the strata that are created.
	Provide (	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?
	Provide (	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?  Yes (Go to Question 8.)
	Provide (	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?
<b>!</b>	Provide ( a.  b.	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?  Yes (Go to Question 8.)
<b>!</b>	Provide to b.  Provide to a.	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?  Yes (Go to Question 8.)  No (Go to Question 9.)
	Provide to b.  Provide to a.	the following information about stratification.  Provide a full description of the strata that are created.  Is clustering used within the stratified sample?  Yes (Go to Question 8.)  No (Go to Question 9.)  the following information about clustering.  Provide a full description of how clusters are formed. (If multistage clusters are

9. Provide the formulas for determining the effective, target, and original outlet sample sizes.

The SSES sample size calculator is used to estimate the sample size. The formula for calculating the effective sample size,  $n_e$ , is based on page 35 (formula S3.4) of the Sample Design Guidance. It is written as:

$$n_e = \frac{1}{\left(\frac{(0.0182)^2}{P(1-P)} + \frac{1}{N}\right)},$$

where P is the expected violation rate (set to 0.2 for conservative sampling) and N is the size of the sampling frame.

The target sample size is determined by multiplying the effective sample size by an assumed design effect of one  $(n_i = dn_e)$ .

The original sample size is determined by inflating the target sample size by the expected eligibility rate  $(r_l)$  and the expected completion rate  $(r_c)$ , where  $r_l$  is an assumed eligibility and  $r_c$  is an assumed completion rate. Eligibility (accuracy) and completion rates from the prior year's survey are used to calculate the original sample size. The original sample size can be written as:

$$n_o = \frac{n_t}{r_l r_c}.$$

\*Please note that the original sample size is further inflated by a 20% safety margin.\*

- 10. Provide the following information about sample size calculations for the current FFY Synar survey.
  - a. If the State uses the sample size formulas embedded in the Synar Survey Estimation System (SSES) Sample Size Calculator, please provide the following information:

**Inputs for Effective Sample Size:** 

RVR: 15.3% Frame Size: 1,303

Input for Target Sample Size:

Design Effect: 1

Inputs for Original Sample Size:

Safety Margin: 20%

Accuracy (Eligibility) Rate: 93.6%

Completion Rate: 92.9%

b.	If the State does not use the sample size formulas embedded in the SSES
	Sample Size Calculator, please provide all inputs required to calculate the
	effective, target, and original sample sizes as indicated in Question 9.

## APPENDIX C: SYNAR SURVEY INSPECTION PROTOCOL

			State: Idaho FFY: 2011
In rej	spection in porting the	nd to WebBGAS a copy of the Synar inspection Form" and a copy of the protocol used to train the results of the Synar inspections under the h	n form under the heading "Synar n inspection teams on conducting and neading "Synar Inspection Protocol."
l.	How do	es the State Synar survey protocol address t	the following?
	a.	Consummated buy attempts?	
		⊠ Required	☐ Not permitted
		Permitted under specified circumstances	☐ Not specified in protocol
	b.	Youth inspectors to carry ID?	
		⊠ Required	☐ Not permitted
		Permitted under specified circumstances	Not specified in protocol
	c.	Adult inspectors to enter the outlet?	
		⊠ Required	☐ Not permitted
		Permitted under specified circumstances	Not specified in protocol
	d.	Youth inspectors to be compensated?	
		⊠ Required	☐ Not permitted
		Permitted under specified circumstances	Not specified in protocol
2.	•	the agency(ies) or entity(ies) that actually conspections of tobacco outlets. (Check all that	
		Law enforcement agency(ies)	
		State or local government agency(ies) other the	nan law enforcement
	$\boxtimes$	Private contractor(s)	
		Other	
	Li	st the agency name(s):	
3.	represe	nar inspections combined with law enforcementatives issue warnings or citations to retailed of the inspection?)?	
	$\boxtimes$	Always Usually Sometimes R	arely Never

4. Describe the methods used to recruit, select, and train youth inspectors and adult supervisors.

Inspection teams are recruited via posting at the Idaho Job Service and through personal contact among teen and adult inspectors. Adult inspectors receive computer based training to learn the rules, regulations, basic procedures and paperwork required for the job. They also receive on-the-job training from an experienced inspector before beginning inspections. Adult inspectors train the inspection assistants and teen inspectors. The minors review the video Teens Taking Action! A Guide to Conducting Tobacco Compliance Checks: Consummated Version and also receive on-the-job training and feedback from the adult inspector. All minors are required to have an Idaho driver's license or identification card and are required to respond truthfully when questioned by the clerk.

	are requi	ired to respond	ruthfully when questioned by the clerk.	_
5.	Are then	re specific lega e of youth insp	or procedural requirements instituted by the State to address ctors' immunity when conducting inspections?	
	a.	Legal	Xes No (If Yes, please describe.)	
		is assisting wi shall not be in	-5702 Possession, distribution or use by a minor states "a minor who a random unannounced inspection in accordance with this chapter violation with this chapter." This specifically states that minors can ossess tobacco during an inspection.	)
	b.	Procedural	Yes No (If Yes, please describe.)	
6.	the issue process	e of the safety	or procedural requirements instituted by the State to address f youth inspectors during all aspects of the Synar inspection  Yes No (If Yes, please describe.)	
	b.	Procedural	Yes No (If Yes, please describe.)	
		team consists minors (one n car or the stor conflict (usua adult tobacco experience. In as unsafe. Th	individuals performing inspections is paramount. Each inspection of two adults (tobacco inspector and inspection assistant) and two ale and one female). This means that minors are not left alone in the All minors are supervised by an adult. At the first sign of any y verbal) during an inspection the minor is sent to the car by the aspector. All of our inspectors have had previous law enforcement spectors and minors are encouraged not to enter outlets they perceive driving records of all inspectors are reviewed and inspection teams from exceeding posted speed limits. New vehicles are used the	

7. Are there any other legal or procedural requirements the State has regarding how

_	ons are to be conducted (e.g., age of youth inspector, time of inspections, g that must occur)?
a.	Legal
	State law requires that all permitted tobacco outlets be inspected at least once per year with additional checks made as a function of the prior year's statewide oncompliance rate. State statute 39-5702, Conduct of Enforcement Actions, states minors can participate in random tobacco inspections with written permission of parent/guardian and they cannot present false identification or lie about their age.
b.	Procedural
	Although not specifically stated in the law, the Idaho Department of Health & Welfare requires all minors to use State of Idaho Driver's Licenses or Identification cards when conducting inspections. The department also limits the age of the inspectors to 17.5 years.

# APPENDIX D: LIST SAMPLING FRAME COVERAGE STUDY

(LIST FRAME ONLY)

	State: Idaho FFY: 2011
1.	Calendar year of the coverage study: 2010
2.	<ul> <li>a. Unweighted percent coverage found: 96.7%</li> <li>b. Weighted percent coverage found:%</li> <li>c. Number of outlets found through canvassing: 182</li> <li>d. Number of outlets matched on the list frame: 176</li> </ul>
3.	a. Describe how areas were defined. (e.g., census tracts, counties, etc.)
	Postal ZIP codes were used to define the areas. A mutually exclusive and exhaustive map of ZIP codes was used to define the area.
	b. Were any areas of the State excluded from sampling?   Yes No  If Yes, please explain.
	Native American Reservations and Mountain Air Force Base ZIP codes were omitted from the population of ZIP codes because the state does not have jurisdiction to conduct enforcement nor permitting in these areas.
4.	Please answer the following questions about the selection of canvassing areas.
	a. Which category below best describes the sample design? (Check only one.)
	Census (Go to Question 6.)
	Unstratified Statewide sample:
	Simple random sample (Respond to Part b.)
	Systematic random sample (Respond to Part b.)
	Single-stage cluster sample (Respond to Parts b and d.)
	Multistage cluster sample (Respond to Parts b and d.)
	Stratified sample:
	Simple random sample (Respond to Parts b and c.)
	Systematic random sample (Respond to Parts b and c.)
	Single-stage cluster sample (Respond to Parts b, c, and d.)
	Multistage cluster sample (Respond to Parts b, c, and d.)
	Other (Please describe and respond to Part b.)

		Small ZIP codes were combined to have an estimated range of 7–20 outlets. Urban ZIP codes were divided to have an estimated range of 7–20 outlets. Combined ZIP codes, whole ZIP codes, and divided ZIP code were randomly sampled to yield an
		estimated total of 200.
	c.	Provide a full description of the strata that were created.
	d.	Provide a full description of how clusters were formed.
5.	Were be	orders of the selected areas clearly identified at the time of canvassing?
6.	Were al	I sampled areas visited by canvassing teams?
	⊠ Yes	(Go to Question 7.) 🔲 No (Respond to Parts a and b.)
	a.	Was the subset of areas randomly chosen?
		☐ Yes ☐ No
	b.	Describe how the subsample of visited areas was drawn. Include the number of areas sampled and the number of areas canvassed.
7.	Were fi	eld observers provided with a detailed map of the canvassing areas?
	Yes Yes	□ No
	If No, de	escribe the canvassing instructions given to the field observers.
8.	Were fi	eld observers instructed to find all outlets in the assigned area?
	<b>Yes</b>	□ No
	If Yes, d	espond to Question 9. Lescribe any instructions given to the field observers to ensure the entire area was ed, then go to Question 10.
	Field ol	oservers were given specific instructions regarding:
	The p	urpose of the survey, to locate all businesses that sell tobacco
	The u	se of detailed highway maps depicted in the border of the sampling area
	How to	to conduct the street survey in rural (e.g., driving & walking) and urban areas
	How	to record information about businesses identified as tobacco retailers

b. Describe the sampling methods.

	Directive to find all tobacco retailers by systematically surveying the sample area
	- Expected response to safety threats
). I	f a full canvassing was not conducted:
a	
b b	
c	TXI II I I I I I I I I I I I I I I I I I
d	
e	. Please describe the canvassing instructions given to the field observers, including predetermined routes.
10. E	Describe the process field observers used to determine if an outlet sold tobacco.
c	a business was identified as a tobacco retailer if tobacco products were observed by the anvasser or the employee/owner indicated that tobacco products were sold if the products were not readily observed.
 1. P	lease provide the State's definition of "matches" or "mismatches" to the Synar ampling frame? (i.e., address, business name, business license number, etc).
n b v	Matches between the findings of field observers and the Idaho tobacco permit database were nade based upon corresponding addresses and business information and valid permits. If a usiness address in the field corresponded with a permittee in the database, but the permit was not active (i.e., not valid for the current year) the combination was considered a mismatch.
	rovide the calculation of the weighted percent coverage (if applicable).
	IA



# C.L. "BUTCH" OTTER GOVERNOR

August 31, 2007

Ms. LouEllen M. Rice
Grants Management Officer
Substance Abuse and Mental Health Services Administration
Office of Program Services
Division of Grant Management
1 Choke Cherry Road, Room 7-1091
Rockville, Maryland 20857

Dear Ms. Rice:

I hereby delegate to the Director of the Idaho Department of Health and Welfare, Richard M. Armstrong, to make application to the United States Department of Health and Human Services for the Substance Abuse Prevention and Treatment (SAPT) Block Grant for the State of Idaho.

This delegation of authority is effective immediately. It extends to any changes or additions to the SAPT Block Grant required by Congress or the Executive Branch, including assurances, certifications, the grant or application requirements.

As Always - Idaho, "Esto Perpetua"

C.L. "Butch" Otter Governor of Idaho

CLO:/ss

ce: Richard Armstrong Richard Humiston Bethany Gadzinski

# SSES Table 1 (Synar Survey Estimates and Sample Sizes)

## **CSAP-SYNAR REPORT**

State	ID
Federal Fiscal Year (FFY)	2011
Date	8/2/2010 10:12
Data	IDSESSInput2011(n=415).xlsx
Analysis Option	Stratified SRS with FPC

## **Estimates**

Unweighted Retailer Violation Rate	14.3%
Weighted Retailer Violation Rate	14.3%
Standard Error	1.6%
Is SAMHSA Precision Requirement met?	YES
Right-sided 95% Confidence Interval	[0.0%, 16.8%]
Two-sided 95% Confidence Interval	[11.2%, 17.3%]
Design Effect	1.0
Accuracy Rate (unweighted)	93.0%
Accuracy Rate (weighted)	93.0%
Completion Rate (unweighted)	92.5%

Sample Size for Current Year

300	
300	
415	
386	
357	
29.6%	
	300 415 386 357

# SSES Table 2 (Synar Survey Results by Stratum and by OTC/VM)

STATE: ID FFY: 2011

Samp. Stratum	Var. Stratum	Oullet Frame Size	Estimated Outlet Population Size	Number of PSU Clusters Created	Number of PSU Clusters in Sample	Outlet Sample Size	Number of Eligible Outlets in Sample	Number of Sample Outlets Inspected	Number of Sample Outlets in Violation	Retailer Violation Rate(%)	Standard Error(%)
'					All	Outlets			···		
1	1	1,303	1,212	N/A	N/A	415	386	357	51	14.3%	
Total		1,303	1,212			415	386	357	51	14.3%	1.6%
				(	over the C	ounter Oi	utlets				
1	1	1,303	1,212	N/A	N/A	415	386	357	51	14.3%	
Total		1,303	1,212			415	386	357	51	14.3%	1.6%
					Vendin	g Machine	es				1
1	1	0	0	N/A	N/A	0	0	0	0	0.0%	
Total		0	0		,	0	0	0	0	0.0%	0.0%

## SSES Table 3 (Synar Survey Sample Tally Summary)

STATE: ID FFY: 2011

Disposition Code	Description	Count	Subtotal
EC	Eligible and inspection complete outlet	357	
Total (Eligible Con	npletes)		357
N1	In operation but closed at time of visit	17	
N2	Unsafe to access	2	
N3	Presence of police	. 1	
N4	Youth inspector knows salesperson	2	
N5	Moved to new location but not inspected	3	
N6	Drive thru only/youth inspector has no drivers license	0	
N7	Tobacco out of stock	1	
N8	Run out of time	0	
N9	Other noncompletion (see below)	3	
Total (Eligible Non	completes)		29
11	Out of Business	5	
12	Does not sell tobacco products	14	
13	inaccessible by youth	1	
14	Private club or private residence	4	
15	Temporary closure	3	
16	Unlocatable	2	
17	Wholesale only/Carton sale only	0	
18	Vending machine broken	0	
19	Duplicate	0	
110	Other ineligibility	0	
Total (Ineligibles)			29
Grand Total			415

# Give reasons and counts for other noncompletion:

Reason	Count
Road closed due to mud slide	1
Mountainous road made dangerous by spring snow	1
Closed for season	1

STATE: ID FFY: 2011

**Frequency Distribution** 

Gender	Age	Number of Inspectors	Attempted Buys	Successful Buys
Male	14	.0	0	0
	15	1	21	0
	16	3	54	5
	17	5	116	29
	18	0	0	0
	Subtotal	9	191	34
Female	14	0	0	0
	15	2	55	4
	16	2	33	5
	17	5	78	8
	18	0	0	0
	Subtotal	9	166	17
Other		0	0	0
Grand Total		18	357	51

## Buy Rate in Percent by Age and Gender

Age	Male	Female	Total
14	0.0%	0.0%	0.0%
15	0.0%	7.3%	5.3%
16	9.3%	15.2%	11.5%
17	25.0%	10.3%	19.1%
18	0.0%	0.0%	0.0%
Other			0.0%
Total	17.8%	10.2%	14.3%

ameSize																																
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Samplii	- ←	1	Н	Н	1	₽	H	H	Н	1	1	1	П	Н	ч	⊣	ᆏ	н	↤	⊣	н	⊣	Н	⊣	⊣	ᆏ	⊣	Н	$\leftarrow$	Т	Н	₽
OutletID	2 12	84	95	115	117	131	136	145	146	163	229	239	243	254	256	257	258	261	262	281	318	320	322	323	332	381	382	397	398	412	413	427

16	16	17	16	15	17	15	17	17	15	17	17	17	17	15	17		17	15	17		16	17	17	17	17	16	16	17	17	16	17	17	16
Σ	Σ	Σ	Σ	ப	Σ	ш	ш	Σ	щ	Σ	ш.	ட	Σ	ட	Σ		Σ	ш	Σ		ட	ш,	ш,	Σ	ட	Σ	u.	Σ	Σ	Σ	Σ	L.	Σ
511198	511186	511194	511203	512205	511194	512206	512203	511194	512206	511194	512203	512203	511194	512205	511190		511194	512206	511190		512208	512195	512203	511194	512195	511198	512196	511194	511194	511198	511194	512203	511203
OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	OTC	. OTC	OTC	OTC	OTC	OTC	отс	OTC	OTC	OTC	OTC
0	0	0	0	0	0	0	П	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	∺	0	0	0	0	0	0	0	0	0
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3642	3644	3658	3661	3662	3681	3698	3707	3708	3712	3714	3775	3777	3782	3794	3825	3829	3830	3838	3843	3877	3881	3892	3894	3899	3900	3902	3907	3908	3909	3929	3932	3935	3936

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#### Idaho Tobacco Compliance Business to be inspected Permit Holder Mailing Address

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	ID Number Inspector ID Number
2. Was a purchase attempt made?	
Yes	No
1. Clerk gender:  Female  Male  Other (please specify)  2. Was minor's ID requested?  Yes  No  Behind counter  3. Was minor asked age?  At check stand  Yes  No  Display case  In an aisle  No  Did the clerk sell?  Yes  No  Other (please specify)  Other (please specify)  Self-service  No  No  No  No  Self-service  No  Attempted product:  Cigars  Cigars  Smokeless  Other violations (issue citations for all marked. Definitions on back of form)  Self-service  Open packages, samples or free tobacco products  Vending machine	Why was purchase attempt not made?  Does not sell tobacco  Unsatisfactory conditions (describe in Comments)  Out of business  Missed store hours (List open hours in Comments)  Denled access due to:  Age restriction (e.g., Bar, lounge, Rquor store)  Membership required (e.g., Social club)  Could not locate address  Does not exist at specified address  Tobacco out of stock  Duplicate business  Temporarily closed  Youth identified or known  Law enforcement present or detected  Other (please specify)
	<b>+</b>
Minor's initials (required)	Inspector's Signature (required)
3. Comments	
	<i>)</i>

#### Idaho Tobacco Compliance

#### Instructions

FORMS WITH INCOMPLETE INFORMATION WILL NOT BE PROCESSED. USE ONLY BLACK BALLPONT PEN. Forms using felt tip markers, roller ball pens, or pencils cannot be processed. THIS FORM IS A LEGAL DOCUMENT. All results must be entered by the inspector immediately after the check is completed. To correct errors, draw a SINGLE LINE through the error, enter the correct information, and initial and date the change. DO NOT use whiteout or erase any information.

For optimum accuracy, use capital letters and avoid contact with the edge of the box.

Shade circles like this:





Not like this: (X) If you make an error filling in a circle, cross it out with a single line, write "error" next to it, and initial, then fill in the correct

- 1. Date of Check: Enter the date the inspection was attempted or performed. Provide the month (mm) / day (dd) / and 2 digit year (yy).
- 2. Was a purchase attempt made?: Different types of information are needed depending on the outcome of the inspection attempt.

#### Yes

Clerk gender: Was the clerk male or female?

Was minor's ID requested?: Did the clerk ask for the ID? Was the minor asked age?: Did the clerk ask the minor's age?

Did the clerk sell?: Was the sale completed?

Did you observe attempt?: Did you witness the sale to the

Attempted product: What type of tobacco product did you attempt to purchase?

Brand of product attempted: What brand of product did the minor attempt to purchase or successfully purchase?

Tobacco placement: Mark the descriptor that best describes where tobacco was located within the business.

Tobacco was: (mark only those that apply)

Self-service: The minor was able to pick up the tobacco without asking a store employee for assistance.

Non-vendor assisted sales: The customer is given the tobacco product at any time before payment, e.g. The customer receives the tobacco product from one clerk and takes it to another clerk for purchase.

Open packages, samples or free tobacco products: Individual cigarettes/cigars are on display AND are not in original package. Tobacco products are available for free. EXCEPT when packaged together with purchased tobacco, e.g. Buy two get one free (all packaged together). Vending Machine: A vending machine, stocked with tobacco AND able to accept money, is anywhere on the premises.

#### No

Does not sell tobacco: The business does not sell tobacco

Unsatisfactory conditions: The business could not be inspected because it was unsafe or, the minor or inspector would be recognized by the clerk.

Out of business: The business was located but has permanently closed.

Missed store hours: The establishment is open for business but was closed. Please indicate operating hours in the comments section.

Denied access: Select the option that best describes why access was denied.

Could not locate address: The specified address could not be located.

Does not exist at specified address: The business does not exist at the listed address.

Tobacco out of stock: The business sells tobacco but is currently out of stock.

Duplicate business: This inspection form is a duplicate. Temporarily closed: This business is closed during expected operating hours and seasons and is not out of business. Youth identified/known: Teen buyer was recognize or is

known by the clerk or other employees.

Law enforcement present or detected: A member of law enforcement is present in the business at the time of the inspection. Presence or detection of this individual prevents the purchase attempt.

Other: List all other conditions that prevented inspection.

Minor Initials and Officer Signature: The minor who conducted the check must enter his or her initials and the inspector must sign it certifying that the information contained in this form is true and correct to the best of your knowledge.

State of Idaho: Synar Inspection Protocol Benchmark Research & Safety Inc.'s

## Assembling the Inspection Team

- ❖ The inspection team will be composed of at least four people:
- The inspector (at least 25 years of age).
- O A male inspecting teen (15 to 17½ years of age)
- A female inspecting teen (15 to 17 ½ years of age)
- An adult chaperone. The chaperone must at least 21 years of age and 25 if driving during inspections.

## Inspector Qualifications and Training

- \* Inspectors must successfully complete the Tobacco Inspection Training program. This CD-ROM based training program provides the basic information needed to safely and efficiently conduct inspections of Idaho's tobacco retailers.
- ❖ Inspectors must also have a current driver's license and vehicle insurance.
- ❖ Inspectors must provide fingerprints for a criminal background check.
- ❖ Upon completion of training, Inspectors will be given a unique ID and number that identifies him/her as an inspector working under the authority of the Idaho Department of Health and Welfare.
- ❖ Inspectors must have this ID with them at all times when conducting inspections.
- \* Inspectors are to show this ID to store employees, business owners, or law enforcement officers if asked to demonstrate authority to enforce this law.

# Inspecting Teen Qualifications and Training

#### Teen Qualifications

- ❖ Male and female minors between the ages of 15 and 17 1/2 years can participate in inspections.
- ❖ All minors must look their age. Teens that look older or younger than their true age can adversely affect inspection outcomes.
- ❖ When selecting a teen, ensure that he or she is ethnically representative of the area. An area that is predominantly Caucasian should be inspected with Caucasian teens.

#### Teen Documentation

- used in any inspection effort, teens and their parents must be informed of the goals, demands, and \* The safety and anonymity of inspecting minors is of the utmost importance. Before teens can be risks associated with inspections.
- \* Before a teen can participate in any inspection activity, the following must obtained:
- o A copy of the teen's birth certificate
- A copy of the teen's state issued identification or driver's license. If he or she does not have an ID card, one can be obtained through the local DMV
- A current photograph of the teen.
- A signed Acknowledgement of Risk form
- A signed Parent/Guardian Release form

#### The 15-Year-Old

- \* Federal child labor laws regulate the work activities of a 15-year-old teen. If you plan to use a 15-year-old teen, you must follow these rules:
- 15-year-olds may be employed outside of school hours for a maximum of 3 hours per day and 18 hours per week when school is in session and a maximum of 8 hours per day and 40 hours a.m. and after 7 p.m., except during summers when they may work until 9 p.m. (from June 1 per week when school is not in session. This age group is prohibited from working before 7 through Labor Day). 0

#### Teen Training

❖ Training for teens is provided via videotape. The tape entitled "Teens Taking Action!" provides teens with the information they will need to perform inspections. Refer to the Teen's Taking Action! training material for further information.

# Chaperone Qualifications and Training

- ❖ Chaperones are provided to ensure the safety of the teen(s) while Inspectors are initiating or completing an inspection. The Chaperone or inspector must accompany teens at all times and should work together to ensure that someone is always with the teens.
- ❖ Chaperones must be at least 21 years of age. Chaperones must be 25 years of age to drive.
- ❖ Inspectors must provide fingerprints for a criminal background check.

- ❖ It is helpful although not required to have a Chaperone of the opposite sex.
- Chaperones must complete the Inspectors CD-ROM based training program.
- \* Chaperones must also have a current driver's license and vehicle insurance if they intend to drive. See "Using Your Vehicle" or "Renting Cars" sections.

#### Performing Inspections

### Before leaving for inspections

Below is a list of items that should be considered for each member of the team before leaving for inspections. The team should have or take with them the following:

Inspector	Teens	Escort
Identification	Identification	Identification
Driver's license	Photograph	Plain clothes
Rental car/ Personal car	Medical release form	
Proof of insurance	Cotool of others	
Plain clothes	School cioines	
Container with:	I Ime sneets	
Black ball Pt pen		
Manual		
Check forms		
Citations		
Notification/Citation.		
Envelopes IDHW		
Certified mail forms		
Labels for evidence		
Polaroid/Film (if		
applicable)		
Money		
Paper clips/tape		
Time sheets		
Map & route		
Copy of the code		
Cell phone		

# On the way to complete inspections the following should be considered:

- \* Review in-store; purchase attempt, and "Did the minor buy?" protocols with minor.
  - \* Rehearse purchase attempt script with minor.
    - ❖ Give sufficient money to minors.
- ❖ The driver should park where the clerk can't see the vehicle, if possible.

### In the store (inspector) Protocol

- Perform a safety check first
- ❖ Leave if conditions are unsafe (mark the Check form accordingly).
- \* Keep teen in sight and sound during the purchase attempt.
- Observe how tobacco is displayed.

### In the store (minor) Protocol

- ❖ Do not take Inspection form inside the store.
- Enter when inspector remains in store.
  - ❖ Leave if recognized.
- ❖ Leave if unsafe.
- ❖ Have ID and money ready.
- \* Approach counter.

NOTE: If the team has both male and female buyers, only one should be in the business at a time. minor who enters the business should match the gender specified for the Synar check.

### Purchase attempt Protocol

#### ❖ Minor Script:

Minor approaches counter asks,

"Can I get a pack of Marlboros (or other type of Tobacco, e.g. Camels), please?"

## IF MARLBOROS ARE UNAVAILABLE:

"Can I get a pack of Camels, please?"

#### \* Minor Response:

Waits until the clerk asks for ID. If clerk asks for ID, show it. If clerk does not ask for ID, hand money to clerk and complete the purchase. If clerk refuses to sell, exit to vehicle.

❖ Other scripts and situations are discussed in the Teens Taking Action! training material.

### Did the minor buy? Protocol

YES Minor takes cigarette pack, change, receipt (if offered), and exits to vehicle.

After minor exits, inspector retrieves citation from vehicle and returns to seller.

Minor exits to the vehicle. Officer follows minor and exits to vehicle.

# Completing the Inspection Form for the No Sale Inspection Protocol

- ❖ Mark appropriate answers on the "YES" sequence of the Inspection Form.
- ❖ Inspector signs and teen initials Inspection Form.
- business day (877-641-4468). Those inspectors who enter their own inspections forms into the database ❖ Fax Inspection Forms for all inspections to Benchmark the same day or no later than 11 AM the next should do so the same day or by the next business day.
- ❖ Mail completed original Inspection Form to Benchmark the same day or no later than 11 a.m. the next
- ❖ NOTE: Incomplete forms (improperly marked, no minor initials, no signature or date, etc.) will be returned for correction. Every attempt should be made to avoid errors.

# Completing the Check Form When a Sale was Made Protocol

#### ❖ In the store:

Inspectors should take the following steps when the minor purchases tobacco and exits to the vehicle.

- Exit the business and retrieve the seller citation from vehicle.
- > Approach seller.
- o Identify himself/herself (if necessary show photo ID) and state purpose.
- Issue seller citation, obtain seller information and signature, and give copy to seller. See citation on next page.
- o Don't delay in returning to the vehicle.
- ❖ Before leaving the parking lot (move out of eyesight of the inspected business).
- Complete Inspection Form (Chaperone can help in completing the Inspection Form)
- Complete Permit Holder Notification/ Citation (Chaperone can help in completing the Form).
- Label the cigarette pack. Chaperone may help. (See Processing Evidence below).
- o Inspector review Inspection Form with teen.
- o Inspector signs and teen initials Inspection Form.
- Inspector's signature on all forms verifies accuracy of information.
- business day (877-641-4468). Those inspectors who enter their own inspections forms into the database \* Fax Inspection Forms for all inspections to Benchmark the same day or no later than 11 AM the next should do so the same day or by the next business day.
- \* Mail completed original Inspection Form to Benchmark the same day or no later than 11 a.m. the next business day.

❖ NOTE: Incomplete forms (improperly marked, no minor initials, no signature or date, etc.) will be returned for correction. Every attempt should be made to avoid errors.

### Incomplete Inspection Protocol

- business that once sold tobacco no longer does, or is closed. Another reason is that the conditions outside ❖ There will be some situations when the inspecting team is unable to complete an inspection of a business. There are a variety of reasons for not completing an inspection. The most common reason is that a or inside the business are unsatisfactory, that is, the conditions are unsafe.
- ❖ The Check Form lists the most common reasons why a check cannot be completed. These include:
- o Does not sell tobacco
- o Unsatisfactory conditions
- Out of business
- Missed hours
- o Denied access due to age restriction
- o Denied access due to membership requirement.
- Could not locate address
- o Does not exist at specified address
- Tobacco out of stock
- Vending machine
- Duplicate business
- $\circ$  Other

#### **Definitions**

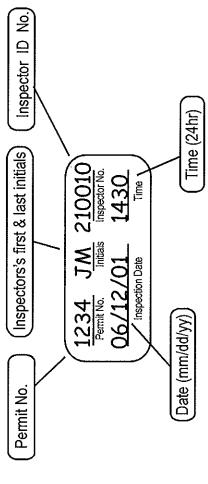
- Does not sell tobacco: The business does not sell tobacco products.
- Unsatisfactory conditions: The business could not be inspected because it was unsafe or the minor or inspector would be recognized by clerk.
- Out of business: The business was located but has permanently closed.
- Missed store hours: The establishment is open for business but was closed. Please indicate operating hours in the comments section.
- Denied access: Select the option that best describes why access was denied.
- Could not locate address: The specified address could not be located.
- Does not exist at specified address: The specified business does not exist at the listed address.
- Tobacco out of stock: The business sells tobacco but is currently out of
- Vending machine: Tobacco products are sold through a vending machine.
- Duplicate business: This inspection form is a duplicate.
- Other: List all other conditions that prevented the inspection.
- section. Most importantly, indicate when the conditions might be satisfactory. For example, a business \* Mark the appropriate condition. If the conditions are unsatisfactory, indicate why in the comments might be okay if it was inspected earlier in the day.
- ❖ If the business is closed, write the hours or months it is open in the comment box.
- \* At an age-restricted business, the minor may be refused entrance. If refused, properly indicate on the "no" side of the inspection form. Use Comment box on the Check Form if necessary.

### Finishing the Paperwork Protocol

- \* Mail Permit Holder Notification/Citation via certified mail to the permit holder (found on Inspection Form) the same day or no later than 11 AM the next business day.
- business day (877-641-4468). Those inspectors who enter their own inspections forms into the database ❖ Fax Inspection Forms for all inspections to Benchmark the same day or no later than 11 AM the next should do so the same day or by the next business day.
- ❖ Mail the Original items listed below to Benchmark the same day or no later than 11 a.m. the next business
- 1. Completed Inspection Forms
- 2. Copy of seller citation
- 3. Copy of Permit Holder Notification/ Citation
- 4. Photographs of the minors (if not done electronically)
- 5. All evidence.

### Processing Evidence Protocol

inspectors ID number, and the date and time of the inspection. The diagram below provides an example case \* Before leaving the parking lot (assuming the location is safe to do so), mark the evidence with a label as follows: Provide the permit number of the inspected business, the inspectors first and last initials, the number written on a label



Evidence Label

\* Affix the label to the back of the cigarette pack as shown below. If a receipt is received tape it securely to the pack of cigarettes.

❖ Mail evidence to Benchmark the same day or no later than 11 a.m. the next business day.

